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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your	e the name that is on government-issued ure identification (for mple, your driver's	Jalal First name	First name
		nse or passport).	Middle name	Middle name
	iden	g your picture tification to your ting with the trustee.	Zahabiun Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer utification number	xxx-xx-5316	

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Debtor 1 Jalal Zahabiun

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		15 Orlando Drive Fairfield, NJ 07004				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Essex				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Jalal Zahabiun

⊃ar	t 2: Tell the Court About	Your E	Bankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				n of each, see <i>Notice</i> of page 1 and check th		11 U.S.C. § 342(b) for Individuals Filing for Bankru e box.	ıptcy
	choosing to file under	■ Chapter 7						
			Chapter 11					
			Chapter 12					
			Chapter 13					
3.	How you will pay the fee	•	about how yo	u may pay. Ty attorney is sub	pically, if you are pay	ing the fee yo	k with the clerk's office in your local court for more ourself, you may pay with cash, cashier's check, or alf, your attorney may pay with a credit card or che	money
					stallments. If you cho		on, sign and attach the Application for Individuals t	o Pay
☐ I request that my fee be waived (You may request this option only but is not required to, waive your fee, and may do so only if your in applies to your family size and you are unable to pay the fee in inst the Application to Have the Chapter 7 Filing Fee Waived (Official F				ur income is less than 150% of the official poverty n installments). If you choose this option, you must	line that			
	Have you filed for							
<i>,</i> .	bankruptcy within the	■ N						
	last 8 years?	ПΥ						
			District		Whe		Case number	
			District		Whe		Case number	
			District	-	Whe	en	Case number	
10.	Are any bankruptcy cases pending or being	■ N	0					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ΠY	es.					
			Debtor				Relationship to you	
			District		Whe	en	Case number, if known	
			Debtor				Relationship to you	
			District		Whe	en	Case number, if known	
11.	Do you rent your residence?	■ N	o. Go to I	ine 12.				
		ПΥ	es. Has yo	ur landlord obt	tained an eviction jud	gment agains	t you?	
				No. Go to line	12.			
				Yes. Fill out <i>li</i> this bankrupto		t an Eviction .	Judgment Against You (Form 101A) and file it as p	art of

Debtor 1	Jalal Zahabiun	Document	Case number (if known	
				•

Part	Report About Any Bu	sinesses `	You Owr	as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Go to Part 4.				
		☐ Yes.	Name	and location of bus	iness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	Number, Street, City, State & ZIP Code				
	it to this petition.		Chec	k the appropriate bo	x to describe your business:			
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate it if you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of s, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure .C. 1116(1)(B).					
	For a definition of small	No.	I am r	not filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Code.					
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Pari	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any				· · ·			
	property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is	the hazard?				
identifiable hazard to public health or safety?								
	Or do you own any property that needs immediate attention?			liate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?				
3.30					Number, Street, City, State & Zip Code			

Debtor 1 Jalal Zahabiun Document Page 5 of 60 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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				•		
t 6: Answer These Quest	ions for Re	porting Purposes				
What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b.				
		Yes. Go to line 17.				
	16b.					
		☐ No. Go to line 16c.				
		☐ Yes. Go to line 17.				
	16c.	State the type of debts you ow	ve that are not consumer debts or busines	es debts		
Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7	7. Go to line 18.			
Do you estimate that after any exempt property is excluded and	■ Yes.					
administrative expenses		No				
are paid that funds will be available for distribution to unsecured creditors?		☐ Yes				
How many Creditors do you estimate that you owe?			□ 1,000-5,000 □ 5001-10,000 □ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
How much do you estimate your assets to be worth?	□ \$50,00 □ \$100,0	1 - \$100,000 01 - \$500,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
How much do you estimate your liabilities to be?	□ \$50,00 ■ \$100,0	01 - \$100,000 01 - \$500,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
t 7: Sign Below						
you	If I have of United State If no attor document I request I understate bankrupto and 3571. /s/ Jalal Jalal Zal Signature	hosen to file under Chapter 7, ates Code. I understand the remey represents me and I did not, I have obtained and read the relief in accordance with the chand making a false statement, or y case can result in fines up to Zahabiun nabiun of Debtor 1	I am aware that I may proceed, if eligible, lief available under each chapter, and I chapter pay or agree to pay someone who is not notice required by 11 U.S.C. § 342(b). Inapter of title 11, United States Code, spectoncealing property, or obtaining money of \$250,000, or imprisonment for up to 20 years. Signature of Debto Executed on	under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7. It an attorney to help me fill out this cified in this petition. or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,		
	Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? How many Creditors do you estimate that you owe? How much do you estimate your assets to be worth?	What kind of debts do you have? 16a. 16b. 16c. 16c. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? How many Creditors do you estimate that you owe? 1-49 50-99 100-19 200-99 How much do you estimate your assets to be worth? Sign Below you 1 have exampt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? How many Creditors do you estimate your assets to be \$50.90 \$100-19 \$50.00 \$100.0 \$50.00 \$100.0 \$50.00 \$100.0 \$500.00 \$100.0 \$100.00 \$100.	What kind of debts do you have? 16a.	What kind of debts do you have? 16a.		

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Debtor 1 Jalal Zahabiun Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ John C. Feggeler, Jr.	Date	October 15, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
John C. Feggeler, Jr. Printed name		
Law Office of John C. Feggeler, LLC		
Firm name		
177 Main Street, P.O. Box 157		
Matawan, NJ 07747-0157		
Number, Street, City, State & ZIP Code		
Contact phone 732-583-6700	Email address	feggelerlaw@verizon.net
NJ-037961986 NJ		
Bar number & State		

First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name
First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name
Debtor 2 (Spouse if, filing) First Name Middle Name Last Name
(Spouse if, filing) First Name Middle Name Last Name
(1)
United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY
Case number
(if known)

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	16,930.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	16,930.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	4,964.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	120,807.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	134,148.97
	Your total liabilities	\$	259,919.97
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,720.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	7,853.04
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
	■ Yes		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Jalal Zahabiun

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

6,720.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	120,807.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	120,807.00

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Fill in this infor	mation to identify your	case and this filing:			
Debtor 1	Jalal Zahabiun				
Johtor 2	First Name	Middle Name	Last Name		
Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		
Jnited States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY			
Case number					Observative distribution in
					☐ Check if this is an amended filing
_	orm 106A/B				
Schedul	e A/B: Prop	erty			12/15
nformation. If mor nswer every ques	re space is needed, attach a stion.	te as possible. If two married peop a separate sheet to this form. On t , Land, or Other Real Estate You C	the top of any additional page:		
. Do you own or	have any legal or equitable	interest in any residence, buildin	g, land, or similar property?		
■ No. Go to Pa	rt 2.				
☐ Yes. Where i	is the property?				
Part 2: Describe	Your Vehicles				
Cars, vans, tr	ucks, tractors, sport uti	ility vehicles, motorcycles			
	Mozdo			Do not deduct secured cla	ims or exemptions. Put
-	Mazda 3	Who has an interest in t	he property? Check one	the amount of any secured Creditors Who Have Clain	d claims on Schedule D:
-	2016	Debtor 1 only ☐ Debtor 2 only		Current value of the	, , ,
Approxima		Debtor 1 and Debtor 2	2 only	entire property?	portion you own?
Other infor	mation:	At least one of the del	otors and another		
		Check if this is come (see instructions)	munity property	\$5,000.00	\$5,000.00
		TVs and other recreational velocational watercraft, fishing vessels, s			
■ No					
□Yes					
		ou own for all of your entries Write that number here			\$5,000.00
Part 3: Describe	Your Personal and House	hold Items			
Do you own or	have any legal or equita	able interest in any of the follo	wing items?		current value of the ortion you own?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 1

Debto				Filed 10/1 Document		Entered 10, ge 11 of 60	/15/19 11:		Desc Main
6. Ho u <i>Exa</i>	sehold goods and amples: Major applia	furnishings	linens, china,	kitchenware			ase number (#		
		Household	goods						\$0.0
Exa	including ce	and radios; audi ell phones, came			equipment;	computers, printe	ers, scanners; ı	music collec	tions; electronic devices
Exa	other collect	d figurines; pain tions, memorabi			; books, pid	ctures, or other ar	t objects; stam	p, coin, or b	aseball card collections;
Exa	musical inst	tographic, exerci	se, and other	r hobby equipme	ent; bicycle	es, pool tables, go	lf clubs, skis; c	anoes and k	cayaks; carpentry tools;
= 1	camples: Pistols, rifle	es, shotguns, an	nmunition, an	d related equipi	ment				
□ 1	<i>camples:</i> Everyday o	clothes, furs, lea	ther coats, de	esigner wear, sh	noes, acces	ssories			
		Clothing, s	hoes, belts	s, etc.					\$750.0
	<i>camples:</i> Everyday j	ewelry, costume	jewelry, enga	agement rings,	wedding rir	ngs, heirloom jewo	elry, watches, o	gems, gold,	silver
<i>E</i> : ■ 1	n-farm animals camples: Dogs, cats No Yes. Describe	, birds, horses							
= 1	y other personal a No 'es. Give specific ir		tems you did	d not already li	st, includi	ng any health aid	ds you did not	list	
15. A	dd the dollar value or Part 3. Write that	e of all of your e					ou have attach	ned	\$750.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Debtor					Entered 10/15/19 11:10 age 12 of 60 Case number (if know	
□N	sh amples: Money y lo	ou have in y	-	ome, in a safe deposit b	pox, and on hand when you file your pe	tition
					Cash	\$80.00
	institutio	g, savings, o		ounts; certificates of de with the same instituti	posit; shares in credit unions, brokerag on, list each.	je houses, and other similar
_	es			Institution name	: :	
		17.1.	Checking	TD Bank Che	eckiing	\$0.00
		17.2.	Checking	First Comme	rce Bank	\$100.00
	amples: Bond fur		ely traded stocks ent accounts with bro	okerage firms, money r	narket accounts	
	es		Institution or issuer	name:		
joi: ■ N	nt venture lo				orated businesses, including an inter	est in an LLC, partnership, and
ПΥ	es. Give specific		about them ne of entity:		% of ownership:	
Ne	egotiable instrume on-negotiable inst	ents include p	ersonal checks, cas		iable instruments ory notes, and money orders. igning or delivering them.	
	es. Give specific		about them uer name:			
	•			.03(b), thrift savings ac	counts, or other pension or profit-sharii	ng plans
■ Y	es. List each acc		ely. of account:	Institution name) :	
		401k		Fidelity 401k		\$11,000.00
Yo	amples: Agreeme	used deposit	s you have made so		e service or use from a company gas, water), telecommunications comp	panies, or others
ΠY	es			Institution name	e or individual:	
23. Anr ■ N	,	ct for a perio	dic payment of mone	ey to you, either for life	or for a number of years)	
	es	Issuer nam	e and description.			
	J.S.C. §§ 530(b)(ualified ABLE progra	m, or under a qualified state tuition p	orogram.
	io 'es	Institution r	name and description	n. Separately file the re	ecords of any interests.11 U.S.C. § 521	(c):

		Case 19-29461	-VFP	Doc 1	Filed 10/15 Document		Entered 10/15/19 11:10:51	L Desc Main
D	ebtor 1	Jalal Zahabiun					Case number (if known)	
25.	Trust	s, equitable or future i	interests i	n property	(other than anythi	ng lis	sted in line 1), and rights or powers exe	rcisable for your benefit
	☐ Yes	. Give specific informa	tion about	them				
26	Exan ■ No	nts, copyrights, tradem nples: Internet domain r	names, wel	bsites, prod				
		·						
27.		ses, franchises, and on ples: Building permits,				on hol	dings, liquor licenses, professional license	es
	☐ Yes	s. Give specific informa	tion about	them				
M	oney o	r property owed to yo	u?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	. Tax re	efunds owed to you						·
	■ No	•						
	☐ Yes	. Give specific informat	ion about t	hem, includ	ding whether you ali	eady	filed the returns and the tax years	
29.		y support	sum alimo	nv snousa	al support, child sup	nort n	naintenance, divorce settlement, property	settlement
	■ No	pico. i ast ade of famp	Julii ulline	ny, spouse	a support, orma sup	port, ii	maintenance, arrorde detaement, property	octionicin
	☐ Yes	s. Give specific informat	ion					
30	Exan	r amounts someone or nples: Unpaid wages, di benefits; unpaid l s. Give specific informa	isability ins loans you			nefits	, sick pay, vacation pay, workers' comper	sation, Social Security
31.	Intere	ests in insurance polic	ies					
	Exan			ırance; hea	lth savings account	(HSA); credit, homeowner's, or renter's insuran	се
	■ No	s. Name the insurance of	company o	f each polic	y and list its value			
	— 103		Company		y and list its value.		Beneficiary:	Surrender or refund value:
32.	If you	nterest in property that a are the beneficiary of a cone has died.	at is due y a living trus	ou from so st, expect p	omeone who has d roceeds from a life	ied insura	nce policy, or are currently entitled to rece	ive property because
	☐ Yes	s. Give specific information	tion					
33.	Exan ■ No	as against third parties apples: Accidents, emplo	yment disp				made a demand for payment sue	
0.4				aime of -	amenationa locale II	.	untavalaima af the debter or defend	not off algions
34.	■ No	contingent and unliq Describe each claim.		aims of ev	ery nature, includi	ng co	unterclaims of the debtor and rights to	set off claims
35.	. Any f ■ No	inancial assets you di	d not alre	ady list				
		s. Give specific informa	tion					

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Page 14 of 60 Case number (if known) Document Debtor 1 Jalal Zahabiun Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$11,180.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$5,000.00 Part 3: Total personal and household items, line 15 57. \$750.00 Part 4: Total financial assets, line 36 \$11,180.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00

\$16,930.00

Copy personal property total

Official Form 106A/B

Schedule A/B: Property

Total personal property. Add lines 56 through 61...

Total of all property on Schedule A/B. Add line 55 + line 62

\$16,930.00

\$16,930.00

		IXXXIIIXXII	1 11111 1111111111111111111111111111111	
Fill in this inform	nation to identify your	case:		
Debtor 1	Jalal Zahabiun			
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY		
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	☐ You are claiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/E	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2016 Mazda 3 90000 miles Line from Schedule A/B: 3.1	\$5,000.00		\$36.00	11 U.S.C. § 522(d)(2)
	Line Holli Scriedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit	
	Clothing, shoes, belts, etc. Line from Schedule A/B: 11.1	\$750.00		\$750.00	11 U.S.C. § 522(d)(3)
	Line IIoiii Scredule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$80.00		\$80.00	11 U.S.C. § 522(d)(5)
	Line Ironi Scriedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking: First Commerce Bank Line from Schedule A/B: 17.2	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
	Line Ironi Scriedule A/B. 17.2			100% of fair market value, up to any applicable statutory limit	
	401k: Fidelity 401k	\$11,000.00		\$11,000.00	11 U.S.C. § 522(d)(12)
	Line from Schedule A/B: 21.1			100% of fair market value, up to	

any applicable statutory limit

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No

Yes

	Case 19-29401-VFF		ae 17	ot eu en 10/12/18 1	.1.10.51 De	esc Main
Fill	in this information to identify you		ue I/ (00		
Deb	tor 1 Jalal Zahabiun First Name	Middle Name Last N	Name			
Dah	otor 2	Middle Name Last i	vaine			
	use if, filing) First Name	Middle Name Last N	Name			
Lloit	and States Pankruntay Court for the	DISTRICT OF NEW JERSEY				
Ullit	ed States Bankruptcy Court for the	DISTRICT OF NEW SERSET				
Cas	e number					
(if kno	own)				☐ Che	eck if this is an
					ame	ended filing
Oπ.	isial Farma 100D					
	icial Form 106D					
Sc	hedule D: Creditors	s Who Have Claims Sec	ured	by Property	y	12/15
Re as	s complete and accurate as possible	If two married people are filing together, bot	h are equa	ally responsible for su	nnlying correct infor	mation If more snace
s ne	eded, copy the Additional Page, fill it	out, number the entries, and attach it to this				
	per (if known).					
I. Do	any creditors have claims secured b	y your property?				
	□ No. Check this box and submit t	his form to the court with your other sched	lules. You	have nothing else t	o report on this form	1.
	■ Yes. Fill in all of the information	below.				
Part	1: List All Secured Claims					
2 li	st all secured claims. If a creditor has	more than one secured claim, list the creditor se	narately	Column A	Column B	Column C
for e	ach claim. If more than one creditor has	a particular claim, list the other creditors in Par		Amount of claim	Value of collateral	Unsecured
mucl	h as possible, list the claims in alphabeti	cal order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
2.4	Westlake Financial					
2.1	Services	Describe the property that secures the claim	im:	\$4,964.00	\$0.00	0 \$4,964.00
	Creditor's Name					
	4751 Wilshire Blvd.	As of the date you file, the claim is: Check a	II that			
	Los Angeles, CA 90010	apply. Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated				
	Hamber, Subst, Sity, State & Zip Sous	☐ Disputed				
Who	o owes the debt? Check one.	Nature of lien. Check all that apply.				
	Debtor 1 only	■ An agreement you made (such as mortgage	ne or secur	ed:		
	Debtor 2 only	car loan)	go o. occu.			
_	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	s lien)			
_	At least one of the debtors and another	☐ Judgment lien from a lawsuit	,			
	Check if this claim relates to a community debt	Other (including a right to offset)				
Date	e debt was incurred	Last 4 digits of account number	xxxx			
				***	4.00	
		olumn A on this page. Write that number her the dollar value totals from all pages.	re:	\$4,96		
	rite that number here:	ine donar value totals Itolii dii pages.		\$4,96	4.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Document	Page 18 of 6	0		
Fill in this i	nformation to identify your	case:				
Debtor 1	Jalal Zahabiun					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing	r) First Name	Middle Name	Last Name			
			Edot Namo			
United State	es Bankruptcy Court for the:	DISTRICT OF NEW JERSEY				
Case numb	er					
(if known)					☐ Check	if this is an
					amend	ed filing
Official F	Form 106E/F					
		ho Have Unsecured	Claims			12/15
any executory Schedule G: I Schedule D: (eft. Attach th name and cas	y contracts or unexpired leases Executory Contracts and Unexp Creditors Who Have Claims Sec	e Part 1 for creditors with PRIORIT that could result in a claim. Also ired Leases (Official Form 106G). I ured by Property. If more space is e. If you have no information to resecured Claims	list executory contracts Do not include any cred needed, copy the Part y	on Schedule A/B: F itors with partially s ou need, fill it out, l	roperty (Official Form ecured claims that a number the entries ir	n 106A/B) and on re listed in the boxes on the
	creditors have priority unsecure					_
□ No. G	Go to Part 2.	· · ·				
Yes.						
List all o identify w possible,	hat type of claim it is. If a claim ha list the claims in alphabetical orde	s. If a creditor has more than one prices both priority and nonpriority amourer according to the creditor's name. If rticular claim, list the other creditors	nts, list that claim here and f you have more than two	d show both priority a	nd nonpriority amount	s. As much as
(For an e	explanation of each type of claim, s	see the instructions for this form in the		Total alaim	Priority	Nonpriority
				Total claim	Priority amount	Nonpriority amount
	cendium Education	Last 4 digits of accou	ınt number XXXX	\$30,721.00	\$30,721.00	\$0.00
	rity Creditor's Name I 00 USA Parkway	When was the debt in	ncurred?			
	hers, IN 46037	Whom was the dest in				
	nber Street City State Zip Code	As of the date you file	e, the claim is: Check all	that apply		
_	curred the debt? Check one.	☐ Contingent				
■ Deb	tor 1 only	☐ Unliquidated				
☐ Deb	tor 2 only	☐ Disputed				
☐ Deb	tor 1 and Debtor 2 only	Type of PRIORITY un	secured claim:			
☐ At le	east one of the debtors and anothe	Domestic support o	bligations			
☐ Che	ck if this claim is for a commur	Taxes and certain of	other debts you owe the g	overnment		
Is the c	laim subject to offset?	☐ Claims for death or	personal injury while you	were intoxicated		
■ No		Other. Specify				
☐ Yes						
Prio	cendium Education rity Creditor's Name	Last 4 digits of accou		\$28,015.00	\$28,015.00	\$0.00
	100 USA Parkway	When was the debt in	ocurred?		-	
	hers, IN 46037 her Street City State Zip Code	As of the date you file	e, the claim is: Check all	that apply		
Who in	curred the debt? Check one.	☐ Contingent				
■ Deb	tor 1 only	☐ Unliquidated				
☐ Deb	tor 2 only	☐ Disputed				
_	tor 1 and Debtor 2 only	Type of PRIORITY un	secured claim:			
	east one of the debtors and anothe	Domestic support o	bligations			
_	eck if this claim is for a commur	_	other debts you owe the g	overnment		
	laim subject to offset?	<u> </u>	personal injury while you			
■ No		☐ Other. Specify				
☐ Yes		. ,				

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Deb	tor 1 _ Jalal Zahabiun	Case number (if known)		
2.3	PHEAA/FED LOAN SERV	Last 4 digits of account number XXXX \$62,071.00	\$0.00 \$62,071	.00
	Priority Creditor's Name POB 60610 Harrisburg, PA 17106	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	☐ At least one of the debtors and another	☐ Domestic support obligations		
	☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government		
	Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated		
	No	Other. Specify		
	Yes			
t	unsecured claim, list the creditor separately for each c	e alphabetical order of the creditor who holds each claim. If a creditor has more the laim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more	3
4.1	Active Orthopedics & Sports Medicine	Last 4 digits of account number 6617	\$66.	.45
	Nonpriority Creditor's Name 25 Prospect Avenue	When was the debt incurred?	_	
	Hackensack, NJ 07601-1960 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	Contingent		
	Debtor 2 only	□ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset? ■ No	□ Debts to pension or profit-sharing plans, and other similar debts		
	<u> </u>			
	☐ Yes	Other. Specify	_	

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Debtor 1 Jalal Zahabiun Case number (if known) 4.2 Last 4 digits of account number \$30.74 Acupath Laboratories, Inc. 8619 Nonpriority Creditor's Name 28 South Terminal Drive When was the debt incurred? Plainview, NY 11803-2309 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 **Allied Board Certified Physicians** 0422 Last 4 digits of account number \$7,125.00 Nonpriority Creditor's Name **POB 135** When was the debt incurred? Oradell, NJ 07649 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.4 Back on Track Chiro, LLC Last 4 digits of account number 453 \$114.00 Nonpriority Creditor's Name 479 Route 79, Suite 15 When was the debt incurred? Morganville, NJ 07751 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: $\hfill \square$ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

Page 21 of 60 Case number (if known) Document Debtor 1 Jalal Zahabiun 4.5 \$305.00 Capital One Bank (USA), N.A. Last 4 digits of account number XXXX Nonpriority Creditor's Name **POB 5253** When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.6 Capital One Bank USA NA Last 4 digits of account number XXXX \$21,128.00 Nonpriority Creditor's Name c/o Portfolio Recovery Associates When was the debt incurred? 100 Corporate Blvd., Suite 100 Norfolk, VA 23502 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.7 Citi Cards/Citibank \$5,309.00 Last 4 digits of account number XXXX Nonpriority Creditor's Name **POB 6241** When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

Other. Specify

 \square Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

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Case number (if known)

Debtor 1 Jalal Zahabiun 4.8 \$5,310.00 Citibank, N.A. Last 4 digits of account number 5145 Nonpriority Creditor's Name c/o GC Services Limited When was the debt incurred? **Partnership POB 3855** Houston, TX 77253 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.9 **DeFelice Orthopedics, PC** Last 4 digits of account number 2721 \$259.15 Nonpriority Creditor's Name When was the debt incurred? 954 Lexington Avenue, #700 New York, NY 10027-5055 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 **Discover Financial Services** \$812.00 XXXX Last 4 digits of account number Nonpriority Creditor's Name **POB 15316** When was the debt incurred? Wilmington, DE 19850 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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Debtor 1 Jalal Zahabiun ase number (if known) **Doctors Office of West Caldwell,** 4.1 1981 \$156.00 **PLLC** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? **POB 870** Newburgh, NY 12551-0870 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Other. Specify 4.1 **Essex Union Podiatry Group, LLP** 7057 \$131.04 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 203 500 Morris Avenue **Springfield, NJ 07081-1027** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 Freehold Area Radiology, PA 1000 \$161.00 Last 4 digits of account number 3 Nonpriority Creditor's Name **POB 6548** When was the debt incurred? Freehold, NJ 07728 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify

Document Page 24 of 60 Case number (if known) Debtor 1 Jalal Zahabiun 4.1 \$600.42 Hackensack Radiology Group 0850 Last 4 digits of account number 4 Nonpriority Creditor's Name **POB 6750** When was the debt incurred? Portsmouth, NH 03802-6750 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 Hackensack Surgery Center, LLC 3718 \$67,897.66 Last 4 digits of account number Nonpriority Creditor's Name c/o Edward S. Zizmore, Esq. When was the debt incurred? **60 Court Street** Hackensack, NJ 07601 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify **Hackensack University Medical** 4.1 6419 \$52.05 6 Last 4 digits of account number Group Nonpriority Creditor's Name POB 419430 When was the debt incurred? Boston, MA 02241-9430 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

Other. Specify

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Jalal Zahabiun Case number (if known)

DCDIO	Jaiai Zaliabiuli	- Case Humber (II known)	
4.1	Hackensack University Medical Group	Last 4 digits of account number 6419	\$349.41
	Nonpriority Creditor's Name POB 419430	When was the debt incurred?	
	Boston, MA 02241-9430		•
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	John L. Lipani, DMD	Last 4 digits of account number jalal	\$372.00
	Nonpriority Creditor's Name David A. Lipani, DMD 720 Route 202-206 North	When was the debt incurred? 5-16-14	
	Bridgewater, NJ 08807	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.1 9	JPMCB Card	Last 4 digits of account number XXXX	\$2,468.00
	Nonpriority Creditor's Name POB 15369	When was the debt incurred?	
	Wilmington, DE 19850		•
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
		<u> </u>	
	☐ Yes	Other. Specify	

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ase number (if known)

Debtor 1 Jalal Zahabiun 4.2 LabCorp 2430 \$42.50 Last 4 digits of account number 0 Nonpriority Creditor's Name **POB 2240** When was the debt incurred? **Burlington, NC 27216-2240** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 Macy's DSNB \$272.00 Last 4 digits of account number XXXX Nonpriority Creditor's Name **Bankruptcy Processing** When was the debt incurred? **POB 8053** Mason, OH 45040 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 Madden Law, LLC \$600.00 2 Last 4 digits of account number Nonpriority Creditor's Name 1704 Maxwell Drive, #108 When was the debt incurred? Wall Twp., NJ 07719 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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Debtor 1 Jalal Zahabiun Case number (if known) 4.2 Mehul Kamdar, M.D. 4691 \$454.82 Last 4 digits of account number 3 Nonpriority Creditor's Name c/o Summit Collection Service, Inc. When was the debt incurred? **POB 306** Ho Ho Kus, NJ 07423-0306 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 4174 Mehul Kamdar, M.D. \$1,795.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Summit Collection Service, Inc. When was the debt incurred? **POB 306** Ho Ho Kus, NJ 07423-0306 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 MonicaTadros, MD, FACS zahabiun \$722.22 Last 4 digits of account number 5 Nonpriority Creditor's Name When was the debt incurred? 300 Grand Avenue, #104 Englewood, NJ 07631 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

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Debtor 1 Jalal Zahabiun Case number (if known) 4.2 **New York-Presbyterian Hospital** V634 \$1,303.47 Last 4 digits of account number 6 Nonpriority Creditor's Name **POB 9305** When was the debt incurred? New York, NY 10087-9305 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 North Jersey Dermatology Ctr. PC 4389 \$676.54 Last 4 digits of account number Nonpriority Creditor's Name 35 Green Pond Road When was the debt incurred? Rockaway, NJ 07866 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 Parabolic Performance & Rehab Li 6477 \$4.500.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 1 Hall Drive When was the debt incurred? Little Falls, NJ 07424-2160 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify

Document Page 29 of 60 Debtor 1 Jalal Zahabiun ase number (if known) 4.2 Summit Medical Group, PA 2983 \$37.44 Last 4 digits of account number 9 Nonpriority Creditor's Name Attn #8549X When was the debt incurred? **POB 14000** Belfast, ME 04915-4033 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 TD Bank, NA 6097 \$235.00 Last 4 digits of account number 0 Nonpriority Creditor's Name **POB 9547** When was the debt incurred? Portland, ME 04112-9547 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 University Radiology Group **71xx** \$91.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Americollect, Inc. When was the debt incurred? 1851 S. Alverno Road Manitowoc, WI 54220 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No
□ Yes

Other. Specify

 \square Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Jalal Zahabiun Case number (if known) 4.3 Verizon Wireless \$520.00 XXXX Last 4 digits of account number 2 Nonpriority Creditor's Name POB 650051 When was the debt incurred? **Dallas, TX 75265** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 Viral Patel \$9,800.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 20 Harding Drive Fairfield, NJ 07004 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 Weill Cornell Medical College \$172.06 7111 Last 4 digits of account number Nonpriority Creditor's Name **GPO Box 28375** When was the debt incurred? New York, NY 10087-8375 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify

Page 31 of 60 Case number (if known) Document Debtor 1 Jalal Zahabiun 4.3 Weill Cornell Physicians 7021 \$280.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 575 Lexington AVenue, Suite 540 When was the debt incurred? New York, NY 10022-6102 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? CitiBank, N.A. Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims P.O. Box 20483 Kansas City, MO 64195 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? I.C. System, Inc. ☐ Part 1: Creditors with Priority Unsecured Claims Line 4.18 of (Check one): **POB 64378** ■ Part 2: Creditors with Nonpriority Unsecured Claims Saint Paul, MN 55164 Last 4 digits of account number **XXXX** Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? REMEX, Inc. Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 307 Wall Street Part 2: Creditors with Nonpriority Unsecured Claims Princeton, NJ 08540 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **SA-Vit Collection AGency** Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 46 W. Ferris Street Part 2: Creditors with Nonpriority Unsecured Claims East Brunswick, NJ 08816 Last 4 digits of account number 456x On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Summit Collection Service** Line 4.23 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 50 N. Franklin Tpke, Suite 50 Part 2: Creditors with Nonpriority Unsecured Claims Ho Ho Kus, NJ 07423 Last 4 digits of account number XXXX

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

On which entry in Part 1 or Part 2 did you list the original creditor?

Total Claim

☐ Part 1: Creditors with Priority Unsecured Claims

XXXX

Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address

Summit Collection Service

Ho Ho Kus, NJ 07423

50 N. Franklin Tpke, Suite 50

Line 4.24 of (Check one):

Last 4 digits of account number

Page 32 of 60 Case number (if known) Debtor 1 Jalal Zahabiun

Fotal	6a.	Domestic support obligations	6a.	\$ 0.00
claims rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 120,807.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 120,807.00
				Total Claim
otal	6f.	Student loans	6f.	\$ 0.00
aims om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 134,148.97
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 134,148.97

		17(7(4)))(1)	T MM. JULY M	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Jalal Zahabiun			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

		Docume	nt Page 34 c	of 60	
Fill in this	information to identify your	case:			
Debtor 1	Jalal Zahabiun				
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the:	DISTRICT OF NEW JE	RSEY		
Case numb	nor .				
(if known)				☐ Check if this is an	
				amended filing	
neople are ill it out, ar your name 1. Do y No Yes 2. With Arizona	filing together, both are equ nd number the entries in the and case number (if known) you have any codebtors? (If	ally responsible for supp boxes on the left. Attach Answer every question you are filing a joint case, of I lived in a community pr Nevada, New Mexico, Pu	operty state or territor erto Rico, Texas, Wash	ry? (Community property states and territories include	
in line Form 1 out Co	2 again as a codebtor only	f that person is a guaran Form 106E/F), or Sched	tor or cosigner. Make	r if your spouse is filing with you. List the person sho sure you have listed the creditor on Schedule D (Office). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the descheck all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line	cial o fil
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
_					
	Number Street	Stata	710 0040		
(City	State	ZIP Code		

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	in this information to identify your of	case:								
Del	btor 1 Jalal Zahab	iun								
	btor 2 buse, if filing)									
Uni	ited States Bankruptcy Court for the	e: DISTRICT OF NEW J	ERSEY							
Ca	se number		_			Chec	ck if this is	:		
(If kı	nown)					An amende	ed filing			
									ng postpetition ollowing date:	
<u>O</u>	fficial Form 106l					Ī	/M / DD/ \	YYYY		
S	chedule I: Your Inc	ome								12/1
atta	use. If you are separated and you che a separate sheet to this form. It 1: Describe Employment	On the top of any additi								
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fi	iling spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed				☐ Employed			
	information about additional	p.:0,	☐ Not employed				☐ Not employed			
	employers.	Occupation	Engineer							
	Include part-time, seasonal, or self-employed work.	Employer's name	KRG Technolog	gies						
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here? 21 mor	nths			_			
Pa	dive Details About Mo	nthly Income								
spo	mate monthly income as of the cuse unless you are separated.	•	, c	·	·			·	•	J
	ou or your non-filing spouse have me space, attach a separate sheet to		ombine the informatio	in for all	empi	oyers for	that perso	on on the ii	mes below. II	you need
						For De	btor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	6	,720.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	6,7	20.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

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Deb	tor 1	Jalal Zahabiun	-	С	ase i	number (<i>if known</i>)				
						Debtor 1	non-	Debtor filing s	pouse	
	Сор	y line 4 here	4.		\$	6,720.00	\$		N/A	<u>\</u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	0.00	\$		N/A	1
	5b.	Mandatory contributions for retirement plans	5b	١.	\$	0.00	\$		N/A	<u></u>
	5c.	Voluntary contributions for retirement plans	5c		\$	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$	0.00	\$		N/A	
	5e.	Insurance	5e		\$	0.00	\$		N/A	
	5f.	Domestic support obligations Union dues	5f.		\$_ \$	0.00	\$		N/A	_
	5g. 5h.	Other deductions. Specify:	5g 5h		φ	0.00	\$ + \$		N/A N/A	
•		· · · · · · · · · · · · · · · · · · ·			· —		· · · ·			_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	0.00	\$		N/A	_
7.	Caic	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	•	\$	6,720.00	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	ı.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b	١.	\$	0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	·.	\$	0.00	\$		N/A	<u>.</u>
	8d.	Unemployment compensation	8d	l.	\$	0.00	\$		N/A	\
	8e.	Social Security	8e	٠.	\$	0.00	\$		N/A	<u>\</u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.00	\$		N/A	_
	8g.	Pension or retirement income	8g		\$	0.00	—		N/A	_
	8h.	Other monthly income. Specify:	8h	ı.+ —	\$	0.00	+ »		N/A	<u></u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$		N/	Α
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	-	6,720.00 + \$		N/A	= \$	6,720.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-		5,720.00		14//		0,7 20.00
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your riferends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a second contribution.	depe		,	,	•	chedule 11.	_	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						12.	\$	6,720.00
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?					,	Combi month	ined ly income
	=	NO.								

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Fill	in this informat	ion to identify yo	ur case:	<u> </u>		Ī		
						OI:	1.26 de la la	
Deb	tor 1	Jalal Zahabiu	ın			Cn	eck if this is: An amended filin	na
Deb	tor 2							owing postpetition chapter
(Spo	ouse, if filing)						13 expenses as	of the following date:
Unit	ed States Bankru	uptcy Court for the:	DISTRI	CT OF NEW JERSEY			MM / DD / YYYY	,
Cas	e number							
(If kı	nown)							
Of	fficial Fo	rm 106J						
		J: Your E	Exper	1999				12/15
Be info nun	as complete a ormation. If mo mber (if knowi	nnd accurate as ore space is nee n). Answer ever	possible eded, atta y questio	. If two married people ch another sheet to th				for supplying correct e your name and case
1.	t 1: Descri	ibe Your House t case?	noia					
	■ No. Go to							
			n a separ	ate household?				
			•					
			t file Offici	al Form 106J-2, Expen	ses for Separate Hous	ehold of De	ebtor 2.	
2.	Do you have	dependents?	□ No					
۷.	Do not list De	•		Fill out this information for	Donondont'o rolet	tianahin ta	Donondont's	Daga danandant
	Debtor 2.	ebioi i and	Yes.	each dependent			Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents r	names.			Mother		87	■ Yes
								□ No
								_ Pes
								□ No
								_ Pyes
								□ No
^	D							Pes
3.	expenses of yourself and	enses include people other th your depender	nts?	No Yes				
Est exp	imate your ex		our bankr	uptcy filing date unles				hapter 13 case to report of the form and fill in the
the		assistance and		government assistand cluded it on <i>Schedul</i> e			Your ex	(penses
,		,						
4.		r home ownersh d any rent for the		ses for your residenc or lot.	e. Include first mortgag	je 4.	\$	1,200.00
	If not include	ed in line 4:						
	4a. Real e	state taxes				4a.	\$	0.00
		ty, homeowner's	, or renter	's insurance		4b.		0.00
				upkeep expenses		4c.	\$	0.00
_		owner's associati				4d.		0.00
5.	Additional n	nortgage payme	ents for yo	our residence , such as	home equity loans	5.	\$	0.00

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Deb	otor 1	Jalal Zah	nabiun	Case num	nber (if known)	
6.	Utiliti	ies:				
0.	6a.		heat, natural gas	6a.	\$	0.00
	6b.		wer, garbage collection	6b.	· ·	0.00
	6c.		e, cell phone, Internet, satellite, and cable services	6c.	· -	100.00
	6d.	Other. Spe		6d.	· ·	0.00
7.			ekeeping supplies	7.	·	695.00
8.			children's education costs	8.		0.00
9.			ry, and dry cleaning	9.		0.00
-		O,	, ,	9. 10.	· ·	
		_	products and services		·	0.00
			ntal expenses	11.	a	231.00
12.			Include gas, maintenance, bus or train fare. ar payments.	12.	\$	350.00
13			ar payments. clubs, recreation, newspapers, magazines, and books		·	0.00
			ributions and religious donations	13.		
14.			ributions and religious donations	14.	Ф	0.00
15.	Insur		surance deducted from your pay or included in lines 4 or	20		
		Life insura		_{20.} 15a.	\$	40.00
		Health insu		15b.	*	506.04
		Vehicle ins		15b. 15c.		222.00
				15d. 15d.	·	
16			rance. Specify:		φ	0.00
10.		ify: Taxes	clude taxes deducted from your pay or included in lines 4	16.	¢	1,000.00
17			ease payments:		Ψ	1,000.00
17.			ents for Vehicle 1	17a.	¢	328.00
			ents for Vehicle 2	17a. 17b.	·	0.00
			oifu: Ctudent Leene	170	·	
				17c. 17d.	· -	660.00
10		Other. Spe	•		Ф	0.00
18.			of alimony, maintenance, and support that you did no your pay on line 5, Schedule I, Your Income (Official F		\$	666.00
19	Other	r navments	s you make to support others who do not live with you	o	\$	1,510.00
10.			's College Expenxses	. . 19.	Ψ	1,510.00
20			erty expenses not included in lines 4 or 5 of this form			
20.			s on other property	20a.		0.00
		Real estate		20b.		0.00
				20b. 20c.		
			nomeowner's, or renter's insurance		·	0.00
			nce, repair, and upkeep expenses	20d.		0.00
			er's association or condominium dues	20e.	·	0.00
21.		r: Specify:	Gasoline	21.		130.00
	EZ P				+\$	185.00
	Car	oil & main	itenance		+\$	30.00
22	Calcı	ulate vour r	monthly expenses			
22.		Add lines 4			\$	7,853.04
			2 (monthly expenses for Debtor 2), if any, from Official Fo	rm 106 L 2	\$	7,833.04
				III 100J-2	l '	
	22c. <i>F</i>	Add line 22a	a and 22b. The result is your monthly expenses.		\$	7,853.04
23.	Calcu	ulate your r	monthly net income.			
		-	12 (your combined monthly income) from Schedule I.	23a.	\$	6,720.00
			monthly expenses from line 22c above.	23b.	· .	7,853.04
		, , our	,,	200.		1,00010-
	23c.	Subtract vo	our monthly expenses from your monthly income.			
			is your monthly net income.	23c.	\$	-1,133.04
			,			
24.			an increase or decrease in your expenses within the y			
			ou expect to finish paying for your car loan within the year or do yo	u expect your mortgage	payment to incre	ease or decrease because of a
			terms of your mortgage?			
	■ No		[-			
	☐ Ye	es.	Explain here:			

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Fill in this informa	ation to identify your	case:				
Debtor 1	Jalal Zahabiun					
	First Name	Middle Name	Las	st Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Lac	st Name		
(Spouse II, IIIIIIg)	i iist ivaille	Wildule Wallie	Lat	st Name		
United States Banl	kruptcy Court for the:	DISTRICT OF NEW JERSE	Υ			
Casa numbar						
Case number						☐ Check if this is an
						amended filing
Official Form	106Dec					
Declaration	on About a	n Individual D	ebt	or's Schedu	ıles	12/15
If two married peo	ple are filing together	, both are equally responsib	le for s	supplying correct infor	mation.	
Var. must file this	form whomever ver fi	la hankuuntav aahadulaa au s	- m- a m al	ad aabadulaa Makina	a falaa atat	amont consoling property or
						ement, concealing property, or 00, or imprisonment for up to 20
	U.S.C. §§ 152, 1341, 1		,		· · · · · · · · · · · · · · · · · · ·	
Sign	Below					
Did you pay	or agree to pay some	one who is NOT an attorney	to help	you fill out bankruptc	y forms?	
■ No						
— Vaa Na	ome of nerson				Attach Dan	New unitory Politican Proporagio Notice
☐ Yes. Na	ame of person					hkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
					200.0.0.0.0.	,, and eignature (emelair emil 11e)
						_
	y of perjury, I declare true and correct.	that I have read the summary	y and s	schedules filed with thi	s declarati	on and
X /s/ Jalal	Zahabiun		х			
Jalal Zal				Signature of Debtor 2		
Signature	of Debtor 1					

Date

Date **October 15, 2019**

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		nation to identify your	Case:			
Debt	or 1	Jalal Zahabiun First Name	Middle Name	Last Name		
Debt	or 2					
(Spous	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	nkruptcy Court for the:	DISTRICT OF NEW JERS	SEY		
Case (if know	e number wn)					Check if this is an mended filing
Sta Be as	complete a	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup additional pages, write you	
Part			rital Status and Where You	Lived Before		
1. V	What is you	current marital statu	is?			
[]	☐ Married ■ Not mar	ried				
2. [Ouring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
] [■ No □ Yes. Lis	t all of the places you li	ived in the last 3 years. Do no	ot include where you live now	·.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
] [■ No □ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Ol	ificial Form 106H).		
Part	2 Explai	n the Sources of You	r Income			
F	Fill in the tota	al amount of income you	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
[□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	ast calenda uary 1 to De	r year: cember 31, 2018)	■ Wages, commissions, bonuses, tips	\$54,840.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Page 41 of 60 Document ase number (if known) Debtor 1 Jalal Zahabiun Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an ☐ No. individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο ☐ Yes. List all payments to an insider. **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment

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paid

still owe

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Include creditor's name

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Debtor 1 Jalal Zahabiun

Par	Identify Legal Actions, Repossession	s, and Foreclosures						
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.							
	□ No							
	Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency	Status of the	ne case			
	Hackensack Surgery Center, LLC vs. Jalal Zahabiun BER-L-7337-18	Debt Collection	Superior Court of New Jersey Bergen County Justice Center 10 Main Street Hackensack, NJ 07601	☐ On appo	■ Pending □ On appeal □ Concluded			
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below ☐ No. Go to line 11. ☐ Yes. Fill in the information below.		perty repossessed, foreclosed	d, garnished, attache	d, seized, or levied?			
	Creditor Name and Address	Describe the Property Explain what happene		Date	Value of the property			
	Diagover Book		¢0.700.00					
	Discover Bank count levied \$9,700.00 c/o Forster, Garbus & Garbus 7 Banta Lace Property was repossessed. Hackensack, NJ 07601 Property was foreclosed. Property was garnished. Property was attached, seized or levied.							
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		cluding a bank or financial in	stitution, set off any	amounts from your			
	Creditor Name and Address	Describe the action th	e creditor took	Date action was taken	Amount			
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a	cy, was any of your prop nother official?	perty in the possession of an	assignee for the ben	efit of creditors, a			
	■ No □ Yes							
Par	t 5: List Certain Gifts and Contributions							
	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gif	ts with a total value of more t	han \$600 per person	?			
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:							

Page 43 of 60 Case number (if known) Document Debtor 1 Jalal Zahabiun 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You 8/9/2019 Law Office Of John C. Feggeler, LLC \$1,735.00 177 Main Street, P.O. Box 157 Amount paid Matawan, NJ 07747 includes the Court's filing fee 8/20/2019 Access Counseling, Inc. \$14.95 633 W. 5th Street, #26001 Los Angeles, CA 90071 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was **Address** property transferred payments received or debts made paid in exchange

Person's relationship to you

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Debtor 1 Jalal Zahabiun

19.		thin 10 years before you filed for bankrup neficiary? (These are often called asset-pro		ny property to a	self-settle	d trust or similar device	e of w	hich you are a
	No							
		Yes. Fill in the details.						
								ate Transfer was ade
Par	t 8:	List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and S	torage Unit	s		
20.		thin 1 year before you filed for bankruptc	y, were any financial ac	counts or inst	ruments he	ld in your name, or for	your	benefit, closed,
	Inc	d, moved, or transferred? lude checking, savings, money market, c uses, pension funds, cooperatives, assoc				t; shares in banks, cred	lit un	ions, brokerage
		No						
		Yes. Fill in the details.						
	Ac	ame of Financial Institution and didress (Number, Street, City, State and ZIP de)	Last 4 digits of account number	Type of acco	unt or	Date account was closed, sold, moved, or transferred	ı	Last balance before closing or transfer
21.		you now have, or did you have within 1 y sh, or other valuables?	year before you filed for	r bankruptcy, a	ny safe de _l		sitory	y for securities,
		No						
1		Yes. Fill in the details.						
	Na	ame of Financial Institution	Who else had acc	cess to it?	Describe	the contents		Do you still
	Address (Number, Street, City, State and ZIP Code)		Address (Number, S State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)				have it?
22.	Ha	ve you stored property in a storage unit o	or place other than your	r home within 1	year befor	e you filed for bankrup	tcy?	
		No						
		Yes. Fill in the details.						
		ame of Storage Facility ddress (Number, Street, City, State and ZIP Code)	to it?			Describe the contents		Do you still have it?
			State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)				
Par	t 9:	Identify Property You Hold or Control	for Someone Else					
23.		you hold or control any property that so someone.	meone else owns? Incl	ude any propei	ty you bor	rowed from, are storing	ı for,	or hold in trust
	_							
		No Yes. Fill in the details.						
		wner's Name ddress (Number, Street, City, State and ZIP Code)		(Number, Street, City, State and ZIP		Describe the property		Value
Par	t 10	Give Details About Environmental Info	ormation					
or t	the	purpose of Part 10, the following definition	ons apply:					
	En	vironmental law means any federal, state	e, or local statute or requ	ulation conceri	ning polluti	on, contamination, rele	ases	of hazardous or

- toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Jalal Zahabiun

24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or in violation of an environme	ental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any i	release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adminis	trative proceeding under any envir	onmental law? Include settlements a	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	11: Give Details About Your Business or Conr	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy, d	id you own a business or have any	y of the following connections to any	/ business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or	equity securities of a corporation						
	■ No. None of the above applies. Go to Part 1	2.						
	☐ Yes. Check all that apply above and fill in th	e details below for each business.						
		scribe the nature of the business	Employer Identification number					
	Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed							
28.	Within 2 years before you filed for bankruptcy, dinstitutions, creditors, or other parties.	id you give a financial statement to	o anyone about your business? Inclu	ude all financial				
	■ No □ Yes. Fill in the details below.							
	Name Dat Address (Number, Street, City, State and ZIP Code)	e Issued						

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Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

Is/ Jalal Zahabiun

Jalal Zahabiun

Signature of Debtor 2

Signature of Debtor 1

Date

October 15, 2019

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your	case:				
Debtor 1	Jalal Zahabiun					
Debtor 1	First Name	Middle Name		Last Name		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name		Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NE	W JERSEY			
	, ,				_	
Case number						- 0
(II KNOWN)						☐ Check if this is an amended filing
						amended filling
Official Fo	orm 108					
		(E 'l' 111 Ol-		
Stateme	nt of Intentio	n tor indiv	<u>riduais</u>	Filing Under Ch	apter 1	12/15
If you are an ind	lividual filing under cha	pter 7, you must fil	I out this for	m if:		
creditors hav	e claims secured by yo	ur property, or				
you have least	sed personal property a	ind the lease has n	ot expired.			
				bankruptcy petition or by the		
whiche on the	,	e court extends th	e time for ca	use. You must also send copie	s to the credit	ors and lessors you list
on the	torm					
If two married p	eople are filing together	r in a joint case, bo	th are equall	y responsible for supplying co	rrect informat	ion. Both debtors must
sign a	nd date the form.					
Re as complete	and accurate as nossih	le If more snace is	s needed att	ach a separate sheet to this for	rm. On the ton	of any additional names
	our name and case nur		inccucu, att	deri a separate sheet to this for	iii. Oii tiie top	or any additional pages,
•		,				
Part 1: List Y	our Creditors Who Have	e Secured Claims				
1 For any credit	tors that you listed in Pa	art 1 of Schedule D	· Creditors V	Who Have Claims Secured by P	ronerty (Offici	al Form 106D) fill in the
information b	-	art i oi ochedale b	. Oreanors v	viio riave Giannis decured by r	roperty (Omer	ai i oiiii 100 <i>D</i>), iiii iii tile
Identify the cr	reditor and the property t	hat is collateral		ou intend to do with the prope		oid you claim the property
			secures a	debt?	а	s exempt on Schedule C?
Creditor's V	Westlake Financial Se	rvices	П с	landha muananti.	г	□No
name:	Westiake Filialicial Se	ei vices		ler the property.	L	→ NO
namo.				the property and redeem it.		Yes
Description of	f			he property and enter into a mation Agreement.	_	- 163
property				he property and [explain]:		
securing debt	:		□ i\etaiii t	ne property and [explain].		
3						
Part 2: List Y	our Unexpired Persona	I Property Leases				
For any unexpire	ed personal property le	ase that you listed	in Schedule	G: Executory Contracts and U	nexpired Leas	es (Official Form 106G), fill
				es are leases that are still in ef oes not assume it. 11 U.S.C. §		period has not yet ended.
rou may assum	e an unexpired persona	ii property lease ir	tne trustee a	bes not assume it. 11 U.S.C. 9	365(p)(2).	
Describe vour	unexpired personal proj	perty leases			Will th	ne lease be assumed?
, ,		, , , , , , , , , , , , , , , , , , , ,				
Lessor's name:					□ No)
Description of le	ased					
Property:					☐ Ye	es
Lessor's name:					☐ No)
Description of le Property:	ased				-	-
i ioperty.					☐ Ye	es
l essor's name					□ Na	

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Deb	otor 1	Jalal Zahabiun	Case number (if known)
_			
	scription perty:	n of leased	☐ Yes
	po.ty.		Li Tes
	sor's n		□ No
	scription perty:	n of leased	□ Yes
	po.ty.		□ Yes
	sor's n		□ No
	scription perty:	n of leased	☐ Yes
0	porty.		□ Yes
	sor's n		□ No
	scription perty:	n of leased	☐ Yes
0	porty.		□ Yes
	sor's n		□ No
	scription perty:	n of leased	
0	porty.		☐ Yes
Par	t 3:	Sign Below	
اء مدا ا		alter of manisms. I dealess that I have i	and a manifestation of any annual and any
		nat is subject to an unexpired lease.	cated my intention about any property of my estate that secures a debt and any personal
Х	/e/ 14	alal Zahabiun	X
^		Zahabiun	Signature of Debtor 2
		iture of Debtor 1	· ·
	Date	October 15, 2019	Date

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Fill	in this information to identify your case:					irected in this form and	in Form
Det	otor 1 Jalal Zahabiun		12	2A-1Sup	pp:		
Deb	otor 2			■ 1 Th	oro is no pros	umption of abuse	
(Spo	use, if filing)			_	·	·	
Uni	ted States Bankruptcy Court for the: District of New Jer	rsey				o determine if a presu nade under <i>Chapter</i> 7	•
Cas	se number					icial Form 122A-2).	
	own)					does not apply now be service but it could ap	
				☐ Che	ck if this is a	n amended filing	
Of	ficial Form 122A - 1						
Ch	napter 7 Statement of Your Cur	rent Mo	nthly Inc	ome)		12/15
	•						
attac case	s complete and accurate as possible. If two married people at ha separate sheet to this form. Include the line number to we number (if known). If you believe that you are exempted from fying military service, complete and file Statement of Exempted.	hich the addition mapped with the mapped with	nal information a of abuse becau	applies. (ise you d	On the top of an o not have prin	ny additional pages, wri narily consumer debts o	te your name and or because of
Par	t 1: Calculate Your Current Monthly Income						
1.	What is your marital and filing status? Check one or	nly.					
	■ Not married. Fill out Column A, lines 2-11.						
	☐ Married and your spouse is filing with you. Fill ou	ut both Columns	s A and B, lines	2-11.			
	$\hfill\square$ Married and your spouse is NOT filing with you.	You and your	spouse are:				
	☐ Living in the same household and are not lega	ally separated.	Fill out both Co	olumns A	and B, lines 2	2-11.	
	Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legally separated.	egally separate	d under nonbar	nkruptcy	law that applie	es or that you and you	
_	living apart for reasons that do not include evadir	-	· ·		• (/ (, ,	
1 tl	ill in the average monthly income that you received from all 01(10A). For example, if you are filing on September 15, the 6-m ee 6 months, add the income for all 6 months and divide the total pouses own the same rental property, put the income from that p	onth period would by 6. Fill in the re	d be March 1 thro sult. Do not inclu	ugh Augu de any ind	st 31. If the amo	ount of your monthly incor ore than once. For examp	ne varied during ble, if both
		,		Columi	· ·	Column B	
				Debtor	1	Debtor 2 or	
2	Your gross wages, salary, tips, bonuses, overtime,	and commission	ons (hefore all			non-filing spouse	
2.	payroll deductions).	and commissi	ons (before an	\$	6,720.00	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	payments from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly pa of you or your dependents, including child support.	aid for househo	old expenses				
	from an unmarried partner, members of your household	d, your depende	ents, parents,				
	and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	oouse only if Co	lumn B is not	\$	0.00	\$	
5.	Net income from operating a business, profession,	or farm		· —			
	, , ,	Dek	otor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from a business, profession, or far	m \$0.00	Copy here ->	•\$	0.00	\$	
6.	Net income from rental and other real property	Dol	otor 1				
	Gross receipts (hefore all deductions)	\$ 0.00	7.01 I				
	Gross receipts (before all deductions) Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from rental or other real property	*	Copy here ->	\$	0.00	\$	
7	Interest, dividends, and royalties	·		\$	0.00	\$	

Official Form 122A-1

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Jalal Zahabiun

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing s	
8.	Unemployment compensation			\$	0.00	\$	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	t received was a benef	it under				
		0.	00				
	For you \$ For your spouse \$						
9.	Pension or retirement income. Do not include any ambenefit under the Social Security Act.	nount received that wa	s a	\$	0.00	\$	
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or paymen manity, or international a separate page and pu	ts or	\$ \$	0.00	\$ \$	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to		\$	6,720.00	+ \$		= \$ 6,720.00
Part	2: Determine Whether the Means Test Applies t	o You					Total current monthly income
12.	Calculate your current monthly income for the year	. Follow these steps:					
	12a. Copy your total current monthly income from line 1	11		Сору	line 11 l	nere=>	\$6,720.00
	Multiply by 12 (the number of months in a year)						x 12
	12b. The result is your annual income for this part of the	e form				12b.	\$80,640.00
13.	Calculate the median family income that applies to	you. Follow these step	s:				
	Fill in the state in which you live.	NJ					
	Fill in the number of people in your household.	2					
	Fill in the median family income for your state and size	of household.				13.	\$ 82,263.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link sp					
14.	How do the lines compare?						
	14a. Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, ch	eck box	1, There is r	no presum	ption of abuse) .
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	The pro	esumption of	abuse is	determined by	Form 122A-2.
Part	3: Sign Below						
	By signing here, I declare under penalty of perjury	that the information or	this sta	atement and i	n any atta	achments is tru	ue and correct.
	χ /s/ Jalal Zahabiun						
	Jalal Zahabiun Signature of Debtor 1						
	Date October 15, 2019 MM / DD / YYYYY If you checked line 14a, do NOT fill out or file Form If you checked line 14b, fill out Form 122A-2 and file.						

Debtor 1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-29461-VFP Doc 1 Filed 10/15/19 Entered 10/15/19 11:10:51 Desc Main Document Page 55 of 60

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of New Jersey

In	re Jalal Zahabiun	•	Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTOI	RNEY FOR D	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filibe rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy,	or agreed to be pai	d to me, for services render	red or to
	For legal services, I have agreed to accept		<u> </u>	0.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are mer	nbers and associates of my	law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				ïrm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspect	s of the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on home 	tement of affairs and plan which tors and confirmation hearing, ar reduce to market value; exe ons as needed; preparation	may be required; and any adjourned he	arings thereof;	g of
6.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any di any other adversary proceeding.			ces, relief from stay ac	tions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of ar s bankruptcy proceeding.	ny agreement or arrangement for	payment to me for	representation of the debto	or(s) in
	October 15, 2019	/s/ John C. Fegge	eler, Jr.		
	Date	John C. Feggeler	, Jr.		-
		Signature of Attorne Law Office of Joh		LC	
		177 Main Street, I	P.O. Box 157		
		Matawan, NJ 077 732-583-6700 Fa			
		feggelerlaw@ver			_
		Name of law firm			

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United States Bankruptcy CourtDistrict of New Jersey

		District of New Jersey		
In re	Jalal Zahabiun		Case No.	
		Debtor(s)	Chapter	7
	VER	RIFICATION OF CREDITOR N	IATRIX	
TC1 1	151, 1 1 '6'			61. 7. 1. 1. 1.
The ab	ove-named Debtor hereby verifies	s that the attached list of creditors is true and co	rrect to the best	of his/her knowledge.
Date:	October 15, 2019	/s/ Jalal Zahabiun		
		Jalal Zahabiun		

Signature of Debtor

Active Orthopedics & Sports Medicine 25 Prospect Avenue Hackensack, NJ 07601-1960

Acupath Laboratories, Inc. 28 South Terminal Drive Plainview, NY 11803-2309

Allied Board Certified Physicians POB 135 Oradell, NJ 07649

Ascendium Education 11100 USA Parkway Fishers, IN 46037

Back on Track Chiro, LLC 479 Route 79, Suite 15 Morganville, NJ 07751

Capital One Bank (USA), N.A. POB 5253 Carol Stream, IL 60197

Capital One Bank USA NA c/o Portfolio Recovery Associates 100 Corporate Blvd., Suite 100 Norfolk, VA 23502

Citi Cards/Citibank POB 6241 Sioux Falls, SD 57117

Citibank, N.A. c/o GC Services Limited Partnership POB 3855 Houston, TX 77253

CitiBank, N.A.
Bankruptcy Dept.
P.O. Box 20483
Kansas City, MO 64195

DeFelice Orthopedics, PC 954 Lexington Avenue, #700 New York, NY 10027-5055

Discover Financial Services POB 15316 Wilmington, DE 19850

Doctors Office of West Caldwell, PLLC POB 870 Newburgh, NY 12551-0870

Essex Union Podiatry Group, LLP 203 500 Morris Avenue Springfield, NJ 07081-1027

Freehold Area Radiology, PA POB 6548 Freehold, NJ 07728

Hackensack Radiology Group POB 6750 Portsmouth, NH 03802-6750

Hackensack Surgery Center, LLC c/o Edward S. Zizmore, Esq. 60 Court Street
Hackensack, NJ 07601

Hackensack University Medical Group POB 419430 Boston, MA 02241-9430

I.C. System, Inc. POB 64378
Saint Paul, MN 55164

John L. Lipani, DMD David A. Lipani, DMD 720 Route 202-206 North Bridgewater, NJ 08807 JPMCB Card POB 15369 Wilmington, DE 19850

LabCorp POB 2240 Burlington, NC 27216-2240

Macy's DSNB Bankruptcy Processing POB 8053 Mason, OH 45040

Madden Law, LLC 1704 Maxwell Drive, #108 Wall Twp., NJ 07719

Mehul Kamdar, M.D. c/o Summit Collection Service, Inc. POB 306 Ho Ho Kus, NJ 07423-0306

MonicaTadros, MD, FACS 300 Grand Avenue, #104 Englewood, NJ 07631

New York-Presbyterian Hospital POB 9305 New York, NY 10087-9305

North Jersey Dermatology Ctr. PC 35 Green Pond Road Rockaway, NJ 07866

Parabolic Performance & Rehab Li 1 Hall Drive Little Falls, NJ 07424-2160

PHEAA/FED LOAN SERV POB 60610 Harrisburg, PA 17106

REMEX, Inc. 307 Wall Street Princeton, NJ 08540 SA-Vit Collection AGency 46 W. Ferris Street East Brunswick, NJ 08816

Summit Collection Service 50 N. Franklin Tpke, Suite 50 Ho Ho Kus, NJ 07423

Summit Medical Group, PA Attn #8549X POB 14000 Belfast, ME 04915-4033

TD Bank, NA POB 9547 Portland, ME 04112-9547

University Radiology Group c/o Americollect, Inc. 1851 S. Alverno Road Manitowoc, WI 54220

Verizon Wireless POB 650051 Dallas, TX 75265

Viral Patel 20 Harding Drive Fairfield, NJ 07004

Weill Cornell Medical College GPO Box 28375 New York, NY 10087-8375

Weill Cornell Physicians 575 Lexington AVenue, Suite 540 New York, NY 10022-6102

Westlake Financial Services 4751 Wilshire Blvd. Los Angeles, CA 90010